TRUSTEES' REPORT AND ACCOUNTS

FOR THE YEAR ENDED 31 MARCH 2014

Charity Registration No. 1071886 Company Registration No. 3606528

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FOR THE YEAR ENDED 31 MARCH 2014

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REPORT OF THE TRUSTEES

The Trustees, who are also Directors of the Charity for the purposes of the Companies Act 2006, present their report with the financial statements of the Charity for the year ended 31 March 2014. The Trustees have adopted the provisions of the Statement of Recommended Practice (SORP) 'Accounting and Reporting by Charities' issued in March 2005.

LEGAL AND ADMINISTRATIVE INFORMATION

Registered Company number:	03606528 (England and Wales)			
Registered Charity number:	1071886			
Trustees (who are also directors):	Paul Sommerfeld Professor Peter Davies Dr Deepti Kumar Edward Sadler Dr Ruth McNerney Glenda Cooper Vagn Hansen Dr Jayant Banavaliker Dr Ebere Okereke Lesley Hynes	Doctor Solicitor University Lecturer Journalist Business Executive		
Company Secretary:	Professor Peter Davies			
Operations Address:	Community Base 113 Queens Road Brighton BN1 3XG			

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REPORT OF THE TRUSTEES – continued

LEGAL AND ADMINISTRATIVE INFORMATION - continued

Registered Office:	Clark Brownscombe Limited 8 The Drive Hove East Sussex BN3 3JT
Independent Auditors:	Clark Brownscombe Limited 8 The Drive Hove East Sussex BN3 3JT
Bankers:	HSBC Bank plc 31 Euston Road London NW1 2ST
	Scottish Widows Bank plc PO Box 12757 67 Morrison Street Edinburgh EH3 8YJ
	CCLA Investment Management Ltd 80 Cheapside London EC2V 6DZ
	Virgin Money plc Jubilee House Gosforth Newcastle upon Tyne NE3 4PL
Solicitors:	Laytons 2 More Riverside London SE1 2AP
Patrons:	Archbishop Emeritus Desmond Tutu Lord Robert Kilpatrick of Kincraig

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REPORT OF THE TRUSTEES – continued

STRUCTURE, GOVERNANCE AND MANAGEMENT

Governing document

The Charity was established as a company on the 30 July 1998 and as a charity on 8 October 1998. It exists to promote awareness of tuberculosis and to support measures to advance the care and treatment of individuals affected by the disease worldwide.

The Charity is registered with the Charity Commission under No. 1071886 in the original name of TB Alert. Its principal office is Community Base, 113 Queens Road, Brighton BN1 3XG.

The Charity is a company limited by guarantee registered in England and Wales under No. 03606528. The Charity is governed by its Memorandum and Articles of Association which require that it has a minimum of three Trustees but specify no maximum.

Recruitment and appointment of new Trustees

New Trustees are elected at the TB Alert Annual General Meeting at which all Ordinary Members may vote. One third of the Board are subject to re-appointment each year, thus Trustees are normally appointed for a period of three years. The Trustees may co-opt a person who is willing to act to be a Trustee during the year. These Trustees are identified by personal enquiry or through advertisement. A Trustee so appointed will hold office only until the next Annual General Meeting at which point they will be proposed for reappointment.

Induction and training of new Trustees

New Trustees are provided with induction materials describing the activities of the Charity and outlining their responsibilities, and they meet with relevant members of the Charity's staff.

Organisational structure

Day to day management of the organisation is the responsibility of the Chief Executive, Mike Mandelbaum.

The Trustees are responsible for the governance of TB Alert. The aim is to include within the trustee body a range of skills and experience appropriate to the aims and management of the Charity. Currently the trustee body includes those with relevant medical, community health, international programmes, advocacy, organisational management, financial and legal skills. The Trustees with medical and community health experience are leading practitioners in the field of tuberculosis. They also provide a link with charities, pharmaceutical companies and medical societies working in related fields.

The Charity has three advisory committees (some of which include external specialists): finance and operations; international programme, and UK advisory.

Wider network

TB Alert is an organisational member of the International Union against Tuberculosis and Lung Disease (IUATLD) and affiliated with the global Stop TB Partnership, the other members of which are organisations with consistent aims. These relationships do not impact on the governance of TB Alert. The Chair of Trustees has been Chair of the Stop TB Partnership Advocacy Working Group.

Related parties

TB Alert works closely with its sister organisation, TB Alert India, based in Hyderabad. TB Alert contributes towards the salaries of nine staff at TB Alert India. Funds raised by TB Alert for projects in India are channelled via TB Alert India; TB Alert India either implements these programmes directly or delivers them through partner NGOs, in which case TB Alert India monitors the activities and performance provides technical assistance.

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REPORT OF THE TRUSTEES – continued

Risk management

The Trustees consider the main risks to which TB Alert could be susceptible and monitor them through a risk register which assesses financial, programmatic and systematic risks to the organisation. This risk register is reviewed by the Trustees at six monthly intervals.

PUBLIC BENEFIT

In shaping our objectives and planning our activities for the year, the Trustees have given consideration to the duties set out in section 17(5) of the Charities Act 2006 to have due regard to public benefit. In particular, the Trustees have considered how the planned activities will contribute to the overall aims and objectives that have been set out in our Memorandum of Association.

The Trustees believe that the following paragraphs, specifically on the "Objectives and Activities" and "Achievements and Performance" for the year, relate in detail the benefit that the charity provides to the public.

OBJECTIVES AND ACTIVITIES

Objectives and aims

Our objects, as defined in our Memorandum of Association, are:

- (a) to support medical, scientific, social and humanitarian activities throughout the world for the relief and rehabilitation of persons affected by Tuberculosis and related medical and social conditions and for the prevention and control of that disease.
- (b) to educate persons throughout the world regarding the effects of Tuberculosis so as to heighten awareness of the need for better detection, treatment and rehabilitation of persons affected by Tuberculosis and related medical and social conditions.

Our vision is the control and the ultimate eradication of TB.

Our mission is to increase access to effective treatment for all.

Strategic Objectives. The charity's strategic plan for 2012-17, contains five strategic objectives:

- 1. Meet the needs of individuals and communities affected by TB for information and support, and raise awareness of TB among health practitioners.
- 2. Strengthen collaboration between health and social care systems and civil society, for the care of patients and the prevention and control of TB.
- 3. Influence resource mobilisation and policy for the care of patients and the prevention and control of TB.
- 4. Measure and demonstrate the impact and cost-efficiency of TB Alert's work.
- 5. Secure committed, skilled and effective staff and trustees and a diversified funding base.

Significant activities

Our main activities, and the people we work to help, are described in the Achievements and Performance section. All of our charitable activities focus on the prevention, access to treatment and successful treatment of Tuberculosis and are undertaken to further our charitable purposes for the public benefit, so as to address the health, social, humanitarian and economic impact of people being infected with Tuberculosis and not accessing treatment and a cure at the earliest opportunity.

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REPORT OF THE TRUSTEES – continued

TB remains the global emergency that the World Health Organisation declared in 1993. Tuberculosis kills 1.45 million people a year (nearly three people every minute). Most deaths occur because patients don't know a cure is available or they have difficulty accessing treatment.

TB is an airborne disease that can affect anyone but is most common among people living in poverty because they are more likely to be malnourished, have poor immune systems and be living in close proximity. TB prevents people from attending education, earning a living or looking after their family, which increases poverty within families and communities.

Tuberculosis is the main killer of people living with HIV in developing countries yet TB can be cured, even if someone is HIV positive, giving them years more life.

Diagnosis of TB can be difficult, especially in children, people who are HIV positive or people with TB affecting parts of the body other than the lungs. Drugs are effective and low cost for drug-sensitive TB but treatment takes at least six months and can cause unpleasant side effects so patients need support to ensure they complete the course. Incomplete treatment risks drug resistance which is difficult and costly to treat. The only vaccine we have, BCG, gives limited protection. So the development of new vaccines, diagnostics and drugs plays a key part in the fight to eradicate TB.

Many people think TB was eradicated in the UK. It never was. The lowest number of cases was in 1987 when there were 5,745 cases. By 2012 there were 8,751.

TB Alert is the only specialist TB charity working to fight Tuberculosis both in the UK and internationally. TB Alert works to ensure that poverty and lack of awareness are not a barrier to accessing TB treatment, and to eliminate the stigma and discrimination associated with Tuberculosis.

Volunteers

Our office in Brighton continued to benefit from the generous time of a number of volunteers, who gave around 1,000 hours over the year, supporting fundraising, administration, international programmes and communications functions. We cannot emphasise enough their importance to our work – we simply could not do it without them.

ACHIEVEMENTS AND PERFORMANCE

Introduction

On World TB Day, 24 March 2014, TB activists around the world rallied around a call to "Reach the 3 Million". We highlighted that every year 9 million people get sick with TB but 3 million of them don't receive the care they need. That startling fact explains why so there are still so many avoidable deaths from TB every year, and highlights the two key benefits of TB Alert's work: by helping people access effective treatment they will be cured of a killer disease, and they will also stop passing on the infection to their families and communities.

We can see progress in fighting TB across the world, with 45% fewer deaths each year than in 1990. But the rate of progress is much too slow, just a couple of percent a year, and people are still dying needlessly every day. This is what motivates TB Alert to reach more people every year, breaking the cycle of illness until one day we can finally add tuberculosis to the list of diseases which have been eradicated.

Our international programme

We continue to focus our work in India, which carries almost a quarter of the global TB burden, and southern Africa, where HIV makes weakened immune systems especially susceptible to TB. Our field work increases awareness and helps people overcome the practical barriers to being tested and treated for TB, and supports them through treatment; supports and trains healthcare professionals and community organisations to help ensure they have the skills and resources to provide effective care; and builds the capacity of civil society organisations to integrate TB into their work and become active and effective partners in the fight against TB. Alongside this, we advocate for the policies, resources and technological developments to strengthen the fight against TB.

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REPORT OF THE TRUSTEES – continued

Our awareness work tackles the myths and misconceptions that so often surround TB, and the stigma that makes people delay seeking life-saving treatment. We believe the fight against TB has to take place in communities as much as in clinics, which is why we work with experts in public and community health alongside leading clinicians.

Together with our sister organisation, TB Alert India, we reached more than 4 million people this year:

- 34,204 people were tested or screened for TB
- 3,261 people were diagnosed with TB
- 2,473 people were supported through treatment
- 8,298 health workers and volunteers were trained
- 4,001,225 people were reached with information about TB, its symptoms and how to get help.

In **India**, together with TB Alert India, we delivered the second year of our **TB in Andhra Pradesh** (TAP) project, helping poor communities in remote, often mountainous areas. Our surveys show that we have more than doubled people's awareness about TB, making it much more likely that people will seek treatment if they feel ill. Our awareness activities take many forms including community awareness meetings, dramas and cultural shows, and a snakes and ladders game for children.

Our impact can be seen by more people attending local clinics: 20% of the people tested are now being referred by our project's staff and volunteers. Additionally, the project's advocacy has resulted in children with TB receiving extra food from the government, helping ensure their growing bodies can absorb their medication effectively.

In India's capital, the **Delhi Divine** project is diagnosing and treating people in some of the city's poorest slum areas. As well as testing several thousand people and diagnosing over 500 new cases of TB, the project trained local health workers, chemists, traditional healers and religious leaders. Delhi Divine's facilities are located in the streets and alleys of the slums, so they become part of the day-to-day landscape and reduce the stigma and fear that often surrounds TB.

In **Zambia** we concluded our **COTHAZ** project which began in 2011. Delivered in partnership with seven local NGOs, the project has successfully increased community members' awareness of TB and their understanding of the treatment available to them. We have also helped local communities advocate for improved health services, which has resulted, for example, in improved ventilation at clinics to reduce the spread of TB among patients.

Over its lifetime the project increased awareness of TB among over three million people. By also establishing new ways for people to be referred to clinics and supported through treatment, this three year project not only resulted in more than 5,400 people being diagnosed with TB, but, of great significance, halved the number of patients who died before completing their treatment.

In **Malawi**, we supported the JournAIDS network to use media in raising awareness and tackling stigma around TB. The project aired four radio programmes in English and the local Chichewa language, featuring former TB patients and local community members. JournAIDS also produced the newsletter 'Positive Voices', which highlighted the impact of TB/HIV collaborative activities implemented by JournAIDS and its partner NGO CYDSE. Positive Voices was circulated among numerous stakeholders including the Ministry of Health, UNAIDS Malawi country office, Southern Africa AIDS Trust, Catholic Commission for Justice and Peace, Oxfam and World Vision International.

In **Zimbabwe**, we continued to support the excellent work of Murambinda Hospital. Over 5,600 people were tested and 684 diagnosed with TB, and we are delighted to report that we are seeing a clear pattern of reduced incidence in the surrounding Buhera district. The outreach work, delivered through a network of 490 community volunteers, reached over 80,000 people with awareness raising activities. We are now working with our partners to expand the work to a province-wide level.

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REPORT OF THE TRUSTEES – continued

Our UK programme

The Truth About TB programme continued to build momentum to improve the health of people and communities around the country. We were delighted that our work received national recognition when it was awarded the 'best public health content' prize at Public Health England's 2013 conference, against competition from over 700 other poster entries. It signalled that our approach of involving third sector organisations is becoming recognised as an integral part of this country's fight against TB. Our approach was also cited in a World Health Organization publication on Best Practices in Prevention, Control and Care of Drug-Resistant Tuberculosis.

We have continued to encourage and support partnerships between the statutory and third sectors and have seen excellent progress, too lengthy to describe in detail here, through the Bradford TB Steering Group, Leeds TB Group, Barts Health TB Network, Liverpool TB Group, London TB Control Board, Birmingham TB Programme Board, and North West TB Summit. If readers of this report would like more detail about developments in their local area please contact the TB Alert office.

As a result of TB Alert's key role in advising on commissioning and delivery processes, we are seeing more widespread commissioning of third sector organisations to carry out TB work. For example, Naz Project London was commissioned by London Borough of Haringey to provide community TB interventions (events, media, group work and outreach) to the value of £45,000, and Redbridge CVS was commissioned for a similar amount for a Health Buddies project to provide outreach, TB information and education, and referral services. In the West Midlands, the Health Protection Unit commissioned two third sector organisations to promote new entrant screening at English language schools, where audit data showed an infection rate around 17% compared with the expectation of 5-8%. These are just a few examples of work we have supported around the country.

During the year we provided training workshops to a wide range of organisations that work with people vulnerable to TB. These included, among others, the West Yorkshire Destitution Support Team of the Red Cross, Enfield Racial Equality Council's Community Champions, Kirklees local authority staff working in housing, and community engagement, and the Newham Youth Employability Guidance Centre.

We developed our first in-depth resource to raise awareness of TB in schools. Working with Brent local authority, we developed a Key Stage 3 curriculum pack which provides lesson ideas on featuring TB across the curriculum. Also in Brent, together with Ealing, we advised public health teams on how to promote screening for latent TB infection (LTBI) programme among new entrants to the UK.

TB Alert was delighted to be asked by Imperial College London to be its lead third sector collaborator on a new five-year respiratory infections grant from the NHS's National Institute for Health Research. The grant is part of an innovative new partnership between academia and Public Health England and TB Alert is advising on how to address social aspects of TB alongside Imperial's cutting-edge scientific research.

We maintained our focus on raising awareness of TB in primary care so as to reduce diagnostic delay, and our online learning course for GPs and primary care nurses, developed with the Royal College of GPs, continued to receive excellent feedback ratings.

TB Alert's Patient Support Fund continued providing grants to meet patients' needs for basic living and travel costs. However the Fund has come under unprecedented pressure in light of increased requests and the difficulty of raising funds, and we have highlighted to local commissioners how they should be supporting the social care needs of patients. As a direct result, commissioners in Manchester and Birmingham have agreed to earmark funding to address this patient need and others are considering doing so. We shall continue to advocate on this issue.

The TB Action Group (TBAG) of people affected by TB has continued to build its reputation and involvement in many advocacy and media activities. We hope that during the next year TBAG will develop a peer support programme to support patients struggling with their TB treatment.

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REPORT OF THE TRUSTEES – continued

Policy and advocacy

This has been a significant year for our policy and advocacy work. In April 2013, following extensive advocacy together with our colleagues at the British Thoracic Society and the All Party Parliamentary Group on Global TB, the newly formed Public Health England agency convened a TB Oversight Group to develop a TB strategy for England. TB Alert was involved in this process throughout the year, including meetings with Ministers and participation in the strategy's drafting. On World TB Day, 24 March 2014, the strategy was published in draft form for a three-month consultation and the final strategy is expected to be published in autumn 2014. This strategy will provide the foundation for the most focused and, we hope, effective range of developments in England's TB programme, with a strong emphasis on the social and public health measures that need to be implemented if we are to start sustainably reducing TB incidence.

We have continued to work with other partners in Stop TB UK (formerly the UK Coalition to Stop TB). The group has liaised with the Department for International Development (DfID) on its support for TB, which led to DfID laying out its four priorities for tackling TB: to help increase access to and use of effective diagnosis and treatment; to invest in product research and development; to support countries to strengthen health systems; and to work with partners to tackle the risk factors for TB, including poverty and malnutrition. This useful explication provides a basis for holding DfID to account for its work on TB.

TB Alert remains active within the TB Europe Coalition (TBEC), a network of civil society activists across Europe and Central Asia. Through its Chair, TB Alert took the lead this year in running a TB advocacy workshop for local TB-interested groups in Azerbaijan and co-facilitating a regional workshop in Kyiv, Ukraine.

FUNDRAISING

Corporate, trust and foundation support

We would like to thank all companies, trusts and foundations that have contributed to our work in the UK and overseas throughout the year. We were delighted to receive grants from many trusts and foundations that had not previously supported TB Alert and we hope to develop long-term relationships with these organisations over the coming years.

Trusts and foundations provide a significant proportion of funding for our programmes and services, helping to change the lives of our beneficiaries. Charitable trust Margaret's Fund has been providing grants for many years to help the most vulnerable women affected by TB. The trust has helped women like Lisa, who was diagnosed with TB and HIV and has no means of financial support, relying heavily on the generosity of friends. The grant provided by Margaret's Fund enabled Lisa to buy the food required to maintain a nutritious diet, which is essential to support her recovery from TB.

Donations and events

We are very grateful to everyone who supports our work, including those motivated by their own experience of TB to donate money or take part in a fundraising event to help others affected by the illness.

We would like to thank all our brave supporters who took part in a range of fundraising events across Europe including marathons, triathlons, cycle rides and skydives. We often hear inspirational stories from people like Markus Gruett, who not only beat TB himself but went on to raise funds and awareness of TB. At first Markus believed that his initial symptoms were due to working long hours and smoking. He says: "Three years ago, even hailing a cab could have sent me into a coughing fit. My whole world came to a grinding halt one morning when my symptoms were so frightening and out of control that I needed immediate emergency attention."

Markus was diagnosed with TB and spent nine days in quarantine, followed by three years of treatment. He says: "I began to feel like a vibrant human being again and for that I am eternally grateful." After his recovery, Markus was bitten by the running bug and recently completed his first marathon, in Berlin, raising funds for TB Alert.

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REPORT OF THE TRUSTEES – continued

In June we held a unique fundraising event called Your Boss is a Drag, which encouraged Brightonbased business executives to compete in a Miss World style pageant. The event enjoyed widespread publicity and raised close to $\pounds 10,000$.

Our BBC Radio 4 Appeal was hosted by Baroness Joan Bakewell, who spoke about our vital work in Zambia. The appeal introduced our work to a national audience and raised over £8,500.

FINANCIAL REVIEW

The year 2013-14 saw our income total \pounds 828,589. Grants from the Department of Health totalled \pounds 189,286 and grants from the Department for International Development totalled \pounds 235,544.

Resources expended were £864,256. Of this amount, £758,328 (88%) was spent directly on charitable activities, $\pounds 163,755$ of which was from unrestricted funds.

Reserves policy

The Trustees have established a policy, reviewed annually, that free reserves held by the charity should be between 3 and 6 months total unrestricted expenditure, which based on the 2014-15 budget equates to between $\pounds 63,345$ and $\pounds 126,690$ in general funds. Unrestricted Funds at the end of the year stood at $\pounds 226,369$.

TB Alert is committed to increasing the scale of its work in order to reach and help more people and we have an objective of diversifying our funding base to become less reliant on statutory grants. In the year 2014-15, we are budgeting for £142,632 of our work in the UK – some 40% of the programme's income – to be raised from trusts and foundations. Our reserves provide some security for this and other ambitions, especially in the context of a challenging environment for statutory as well as trust funding.

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REPORT OF THE TRUSTEES – continued

STATEMENT OF TRUSTEES' RESPONSIBILITIES

The Trustees (who are also the directors of the company for the purposes of company law) are responsible for preparing the Trustees' Report and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires Trustees to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that period. In preparing these financial statements, the Trustees are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the Charities SORP;
- make judgements and estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements; and
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in business.

The Trustees are responsible for keeping adequate accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

STATEMENT AS TO DISCLOSURE OF INFORMATION TO AUDITORS

So far as the Trustees are aware, there is no relevant audit information (as identified by section 418 of the Companies Act 2006) of which the charity's auditors are unaware. Each Trustee has taken all the steps that he or she ought to have taken as a Trustee in order to make himself or herself aware of any relevant audit information and to establish that the charity's auditors are aware of that information.

AUDITORS

A resolution to reappoint Clark Brownscombe Limited as auditors to the charitable company will be proposed at the forthcoming Annual General Meeting.

The Trustees have prepared this report in accordance with the special provisions of Part 15 of the Companies Act 2006 relating to small companies.

Approved by the Trustees on

and signed on their behalf by:

P J Sommerfeld Trustee

Charity Registration No. 1071886 Company Registration No. 3606528

INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF TB ALERT

We have audited the financial statements of TB Alert for the year ended 31 March 2014 which comprise the Statement of Financial Activities, the Balance Sheet and the related notes. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

This report is made solely to the charity's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the charity's members those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the charity and the charity's members as a body, for our audit work, for this report, or for the opinions we have formed.

Respective responsibilities of trustees and auditor

As explained more fully in the Trustees' Responsibilities Statement, the trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view.

Our responsibility is to audit and express an opinion on the financial statements in accordance with applicable law and International Standards on Auditing (UK and Ireland). Those standards require us to comply with the Auditing Practices Board's (APB's) Ethical Standards for Auditors.

Scope of the audit of the financial statements

An audit involves obtaining evidence about the amounts and disclosures in the financial statements sufficient to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or error. This includes an assessment of whether the accounting policies are appropriate to the charitable company's circumstances and have been consistently applied and adequately disclosed, the reasonableness of significant accounting estimates made by the trustees and the overall presentation of the financial statements.

Opinion on financial statements

In our opinion the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 March 2014 and of its incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice, and
- have been prepared in accordance with the requirements of the Companies Act 2006.

Opinion on other matter prescribed by the Companies Act 2006

In our opinion the information given in the Trustees' Annual Report for the financial year for which the financial statements are prepared is consistent with the financial statements.

Charity Registration No. 1071886 Company Registration No. 3606528 INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF TB ALERT

Matters on which we are required to report by exception

We have nothing to report in respect of the following matters where the Companies Act 2006 requires us to report to you if, in our opinion:

- adequate accounting records have not been kept or returns adequate for our audit have not been received from branches not visited by us;
- the financial statements are not in agreement with the accounting records and returns;
- certain disclosures of trustees' remuneration specified by law are not made, or
- we have not received all the information and explanations we require for our audit.

J Thacker FCA DChA Senior Statutory Auditor

For and on behalf of Clark Brownscombe Limited Statutory Auditor 8 The Drive Hove East Sussex BN3 3JT

Date:

Charity Registration No. 1071886

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STATEMENT OF FINANCIAL ACTIVITIES (INCORPORATING INCOME AND EXPENDITURE ACCOUNT) FOR THE YEAR ENDED 31 MARCH 2014

	Notes	Unrestricted Funds £	Restricted Funds £	Total Funds 2014 £	Total funds 2013 £
INCOMING RESOURCES	110105	~	~	~	~
Incoming resources from generated					
funds:					
Voluntary income	2	209,069	109,480	318,549	448,118
Activities for generating funds	2	17,550	-	17,550	2,301
Investment income	2	4,115	-	4,115	6,735
Incoming resources from charitable activities:					
UK Programmes	2	10,830	242,001	252,831	288,648
International Programmes	2	-	235,544	235,544	306,988
Advocacy Programmes	2				3,041
TOTAL INCOMING RESOURCES		<u>241,564</u>	<u>587,025</u>	<u>828,589</u>	<u>1,055,831</u>
RESOURCES EXPENDED					
Costs of generating funds					
Costs of generating voluntary	3	100,571	-	100,571	131,832
income					
Fundraising trading: cost of goods sold and other costs	3	1,263	-	1,263	2,544
Charitable activities					
UK Programmes	3	19,756	324,451	344,207	358,403
International Programmes	3	126,428	264,915	391,343	435,263
Advocacy Programmes	3	17,571	5,207	22,778	24,893
Governance costs	3	4,094		4,094	7,009
TOTAL RESOURCES EXPENDED		<u>269,683</u>	<u>594,573</u>	<u>864,256</u>	<u>959,944</u>
NET INCOMING / (OUTGOING) RESOURCES		(28,119)	(7,548)	(35,667)	95,887
GAINS ON REVALUATION OF ASSETS FOR CHARITY'S OWN USE		(4,812)	-	(4,812)	-
TOTAL FUNDS START FINANCIAL YEAR		259,300	26,691	<u>285,991</u>	<u>190,104</u>
TOTAL FUNDS END FINANCIAL YEAR	17	<u>226,369</u>	<u> 19,143</u>	<u>245,512</u>	<u>285,991</u>

The statement of financial activities also complies with the requirements for an income and expenditure account under the Companies Act 2006. All of the above relate to continuing activities.

There have been no recognised gains or losses other than the results for the financial year and all surpluses or deficits have been accounted for on a historical cost basis.

The notes set out on pages 15 to 24 form part of these financial statements.

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BALANCE SHEET

AS AT 31 MARCH 2014

FIXED ASSETS IT Equipment	Notes 10		2014 £ 2,686		2013 £ 4,221
CURRENT ASSETS Stocks Debtors Cash at bank and in hand	11	3,658 47,076 <u>286,051</u> 336,785		4,570 18,607 <u>397,244</u> 420,421	
CREDITORS Amounts falling due within one year NET CURRENT ASSETS	12	<u>93,959</u>	<u>242,826</u>	<u>138,651</u>	<u>281,770</u>
TOTAL ASSETS LESS CURRENT LIABILITIES			<u>245,512</u>		<u>285,991</u>
FUNDS Unrestricted Funds Restricted Funds	17		226,369 19,143		259,300 26,691

TOTAL FUNDS

These financial statements have been prepared in accordance with the special provisions of Part 15 of the Companies Act 2006 relating to small companies.

The accounts were approved by the Board on

and signed on its behalf by:

285,991

245,512

P J Sommerfeld Trustee V Hansen Trustee

The notes set out on pages 15 to 24 form part of these financial statements.

Charity Registration No. 1071886 Company Registration No. 3606528

NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2014

1. ACCOUNTING POLICIES

The following accounting policies have been applied consistently in dealing with items which are considered material in relation to the financial statements.

1.1 Basis of Preparation

The financial statements have been prepared under the historical cost convention and in accordance with the Financial Reporting Standard for Smaller Entities (effective April 2008), the Companies Act 2006 and the requirements of the Statement of Recommended Practice, Accounting and Reporting by Charities, issued in March 2005.

1.2 Incoming Resources

All incoming resources are included on the Statement of Financial Activities when the charity is legally entitled to the income and the amount can be quantified with reasonable accuracy.

Grants and donations receivable in respect of specific restricted expenditures are recognised as income in the period in which the relevant expenditure occurs or as specified by the donor.

Where grants are received during the year under review but relate to a later period the amount is deferred under Grants in Advance in the Balance Sheet.

All other donations and gifts are accounted for when they are received. Tax recoverable on gift aid donations received is provided in full in the period in which the donation is received.

1.3 Resources Expended

Expenditure is accounted for on an accruals basis, including irrecoverable VAT, and has been classified under headings that aggregate all cost related to the category. Where costs cannot be directly attributed to particular headings they have been allocated to activities on a basis consistent with the use of resources. Grants offered subject to conditions which have not been met at the year end date are noted as a commitment but not accrued as expenditure.

Cost of generating funds

Fundraising costs are those incurred in seeking voluntary contributions and do not include the costs of disseminating information in support of charitable activities.

Charitable activities

Project grant expenditure is charged to the Statement of Financial Activities when a constructive obligation exists, notwithstanding that they may be paid in future periods. All other expenditure is recognised in the period in which it is incurred.

Governance costs

Governance costs are costs associated with the governance arrangements for the charity as opposed to costs associated with charitable or fundraising activities.

Allocation and apportionment of costs

Expenditure is allocated to five areas of activity where the cost relates directly to that area, with salaries allocated based on time spent. The five areas of activity are: UK programmes, international programmes, advocacy programmes, fundraising, and governance.

1.4 Stocks

Stocks are valued at the lower of cost and net realisable value, after making due allowance for obsolete and slow moving items.

Charity Registration No. 1071886

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NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2014 – continued

ACCOUNTING POLICIES - continued

1.5 Taxation

The Charity is exempt from Corporation Tax on its charitable activities under Section 505(1) of the Income and Corporation Taxes Act 1988.

1.6 Fund accounting

Unrestricted funds can be used in accordance with the charitable objectives at the discretion of the Trustees.

Restricted funds can only be used for particular restricted purposes within the objects of the Charity. Restrictions arise when specified by the donor or when funds are raised for particular restricted purposes.

Further explanation of the nature and purpose of each fund is included in the notes to the financial statements.

1.7 Hire purchase and leasing commitments

Rentals paid under operating leases are charged to the Statement of Financial Activities on a straight line basis over the period of the lease.

1.8 Pension costs and other post-retirement benefits

The charitable company operates a defined contribution pension scheme. Contributions payable to the charitable company's pension scheme are charged to the Statement of Financial Activities in the period to which they relate.

These contributions are invested separately from the Charity's assets.

1.9 Tangible Fixed Assets

All assets costing more than £1,000 are capitalised. Depreciation is calculated so as to write off the cost of an asset over the useful economic life of that asset as follows:

Computer equipment – straight line over 3 years

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NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2014 - continued

2. INCOMING RESOURCES

INCOMING RESOURCES FROM GENERATED FUNDS Voluntary Income	Unrestricted Funds £	Restricted Funds £	Total 2014 £	Total 2013 £
			~ 	
Donations	85,575	10,000	95,575	189,506
Gift Aid	7,208	-	7,208	10,800
Legacies	14,079	-	14,079	-
Corporate	66,739	18,675	85,414	102,697
Trusts and foundations	35,468	80,805	116,273	145,115
Community groups	<u>-</u> 209,069	- <u>109,480</u>	<u>-</u> <u>318,549</u>	448,118
Activities for generating funds				
Fundraising events Fundraising trading	16,091 <u>1,459</u> <u>17,550</u>	-	16,091 <u>1,459</u> <u>17,550</u>	<u>2,301</u> 2,301
Investment Income	<u> </u>		<u> </u>	<u></u>
INCOMING RESOURCES FROM CHARITABLE ACTIVITIES				
UK Programmes International Programmes	10,830	242,001 235,544	252,831 235,544	288,648 306,988
Advocacy Programmes	10,830	<u>477,545</u>	488,375	<u>3,041</u> <u>598,677</u>
TOTAL INCOMING RESOURCES	<u>241,564</u>	<u>587,025</u>	<u>828,589</u>	<u>1,055,831</u>

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NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2014 – continued

3. RESOURCES EXPENDED

CHARITABLE ACTIVITIES	Unrestricted Funds £	Restricted Funds £	Total 2014 £	Total 2013 £
UK Programmes				
Programme activities, including staff				
and associated costs	17,682	305,249	322,931	328,033
Organisational costs	2,074	<u>19,202</u>	<u>21,276</u>	30,370
	<u> 19,756 </u>	<u>324,451</u>	<u>344,207</u>	<u>358,403</u>
International Programmes				
Programme activities	30,345	223,323	253,668	330,122
UK based staff and associated costs	87,436	40,647	128,083	94,695
Organisational costs	<u>8,647</u> 126,428	<u>945</u> 264 015	<u>_9,592</u> 301 343	$\frac{10,446}{435,263}$
	<u> 120,420</u>	<u>264,915</u>	<u>391,343</u>	433,203
Advocacy Programmes				
Programme activities, including staff				
and associated costs	15,535	4,242	19,777	22,779
Organisational costs	<u>2,036</u> <u>17,571</u>	<u>965</u> <u>5,207</u>	<u>3,001</u> <u>22,778</u>	<u>2,114</u> 24,893
	<u></u>		<u> </u>	<u>_24,095</u>
TOTAL CHARITABLE ACTIVITES	<u>163,755</u>	<u>594,573</u>	<u>758,328</u>	<u>818,559</u>
GOVERNANCE COSTS				
Meeting costs	839	-	839	2,740
Audit fees	2,550	-	2,550	4,179
Organisational costs	<u>705</u>	<u> </u>	<u>705</u>	90
	<u>4,094</u>	<u> </u>	<u>4,094</u>	<u>7,009</u>
FUNDRAISING COSTS				
Cost of generating voluntary income				
Fundraising costs	11,754	-	11,754	36,345
Staff and associated costs	<u>88,817</u> 100,571	<u> </u>	<u>88,817</u> 100,571	<u>95,487</u> <u>131,832</u>
Fundraising trading: cost of goods	100,5/1	<u> </u>	100,5/1	151,052
Christmas card costs	1,050	-	1,050	2,222
Postage and packaging	213	<u> </u>	213	322
	<u> 1,263 </u>		<u> 1,263</u>	2,544
TOTAL RESOURCES EXPENDED	<u>269,683</u>	<u>594,573</u>	<u>864,256</u>	<u>959,944</u>

Charity Registration No. 1071886

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NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2014 – continued

4. BREAKDOWN OF PROGRAMME COSTS

	Unrestricted Funds £	Restricted Funds £	Total 2014 £	Total 2013 £
UK Programmes				
UK Awareness and Partnerships Programmes	7,047	299,766	306,813	311,616
Primary Care Awareness	,,,,,,,	4,525	4,525	16,067
Patient Support Fund	3,650	20,160	23,810	22,551
TB Action Group	9,059	20,100	23,010 9,059	8,169
	<u></u>	324,451	<u> </u>	<u>358,403</u>
	<u> </u>	<u>524,451</u>	<u>J44,207</u>	<u>330,403</u>
International Programmes				
India – APCHIP	_	_	_	31,873
India – TAP	_	122,937	122,937	116,314
India – Delhi Divine Project	-	7,324	7,324	2,914
India – TB Alert India costs	18,048	6,762	24,810	32,388
Zambia – COTHAZ	10,040	0,702 112,607	24,810 112,607	
Malawi – Journaids	-	· · · · ·	,	158,801
Zimbabwe – Murambinda Hospital	-	8,178	8,178	10.050
International Project Management	17,881	7,107	24,988	18,852
international Project Management	<u>90,499</u>	-	<u>90,499</u>	<u>_74,121</u>
	<u>126,428</u>	<u>264,915</u>	<u>391,343</u>	<u>435,263</u>
Advocacy Programmes				
Advocacy for Global Health	-	-		-
TB Europe Coalition	-	5,207	5,207	7,462
TB Survival Prize	-	-	-	-
Other advocacy programmes	<u>17,571</u>	<u> </u>	<u>17,571</u>	<u>17,431</u>
	<u> 17,571</u>	<u> </u>	<u>22,778</u>	<u>24,893</u>
Total Programme Costs	<u>163,755</u>	<u>594,573</u>	<u>758,328</u>	<u>818,559</u>
	100,100	<u>577,575</u>	10,040	010,337

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NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2014 – continued

5. GRANTS PAYABLE

	2014	2013
	£	£
The total grants paid during the year was		
as follows:		
UK - Patient Support Fund	21,401	22,451
UK - Awareness and Partnership Programmes	6,800	14,000
Advocacy Programmes	-	-
India - APCHIP	-	27,351
India - TAP	108,423	104,560
India - Delhi Divine Project	6,421	2,914
India - TB Alert India costs	24,538	32,388
Zambia - COTHAZ	86,859	141,534
Malawi - Journaids	7,752	-
Zimbabwe - Murambinda Hospital	19,640	15,387
International Project Management		4,956
	281,834	365,541

6. SUPPORT COSTS

	UK Programmes	International Programmes	Advocacy Programmes	Fundraising	Governance	Total 2014
Management	29,055	9,078	2,142	8,217	611	49,103
Finance	1,841	119	5	1,271	2,550	5,786
Administration	<u>_4,607</u>	408	<u> </u>	<u>1,914</u>	25	6,970
	<u>35,503</u>	<u> 9,605 </u>	<u>2,163</u>	<u>11,402</u>	<u>3,186</u>	<u>61,859</u>

7. NET INCOMING / (OUTGOING) RESOURCES

	2014	2013
	£	£
Net resources are stated after charging/(crediting)		
Auditors' remuneration	4,269	4,179
Depreciation	1,535	384
	<u> </u>	4,563

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NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2014 - continued

8. TRUSTEES' REMUNERATION AND BENEFITS

There were no Trustees' remuneration or other benefits for the year ended 31 March 2014 nor for the year ended 31 March 2013.

Trustees' Expenses - Payments were made to one Trustee (2013: three Trustees) during the year totalling £5,425 (2013: £5,209). These consisted of reimbursement of expenses (mainly travel and subsistence). The amount of expenses incurred relating to governance was £98 and the amount of expenses incurred directly in the course of TB Alert's charitable activities was £5,327.

9. STAFF COSTS

2014	2013
£	£
354,150	342,433
36,232	34,399
13,355	12,656
403,737	<u>389,488</u>
	£ 354,150 36,232 13,355

The average monthly number of employees the year was 12 (2013: 13)

No employee received emoluments in excess of £60,000 in the year.

10. TANGIBLE FIXED ASSETS

	Computer Equipment £
Cost	
At 1 April 2013 Additions	4,605
Disposals	-
At 31 March 2014	4,605
Depreciation	
At 1 April 2013	384
Additions	1,535
Disposals At 31 March 2014	<u> </u>
Net book value	
At 31 March 2014	<u>2,686</u>
At 31 March 2013	<u>4,221</u>

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NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2014 – continued

11. DEBTORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2014	2013
	£	£
Trade Debtors	2,929	3,530
Other Debtors	<u>44,147</u>	<u>15,077</u>
	<u>47,076</u>	<u>18,607</u>

12. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2014	2013
	£	£
Trade Creditors	49,133	17,706
Taxation and Social Security	7,876	8,265
Deferred Income	26,429	92,552
Other Creditors	10,521	20,128
	93,959	<u>138,651</u>

The Charity has made no firm commitments in respect of its grant-making activity that are not reflected in these accounts.

13. ANALYSIS OF NET ASSETS BETWEEN FUNDS

	Unrestricted	Restricted	2014	2013
	Funds	Funds	Total	Total Funds
	£	£	Funds	£
			£	
Fixed Assets	2,686	-	2,686	4,221
Current Assets	294,215	42,570	336,785	420,421
Current Liabilities	70,530	23,429	93,959	<u>138,651</u>
	226,371	<u>19,141</u>	245,512	<u>285,991</u>

14. CONTINGENT LIABILITIES

The balances on the restricted funds will be used to continue to fund the project to which they relate. In the unlikely event that the project is terminated, the balance will be repayable to the original funder where applicable. It is not possible to evaluate the potential liability that may arise in this situation.

15. RELATED PARTY DISCLOSURES

TB Alert India is considered to be a related party by virtue of being a sister organisation based in Hyderabad involved in the monitoring of the activities and performance of projects based in India.

During the current year, TB Alert contributed £24,538 towards TB Alert India's core costs.

16. SHARE CAPITAL

The company is limited by guarantee with no issued share capital. Each member has undertaken to contribute a maximum of $\pounds 10$ in the event of the Charity being wound up.

Charity Registration No. 1071886

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NOTES TO THE FINANCIAL STATEMENTS FOR THE YEAR ENDED 31 MARCH 2014 - continued

17. MOVEMENT IN FUNDS

	Balance as at 1 April 2013	Income	Expenditure	Balance as at 31 March 2014
UK Programmes		100 000	(100.000)	
Third Sector Investment Programme (Dept. of Health) Other UK Awareness and Partnership Programmes	- 1,186	189,286 109,296	(189,286) (110,482)	-
Primary Care Awareness Project (Dept. of Health)	1,100	4,525	(110,482) (4,525)	-
Patient Support Fund – UK General Fund	1,506	9,200	(10,706)	-
Patient Support Fund – Bedfordshire Fund	2,100	- 200	(10,700)	2,100
Patient Support Fund – Bradford/Leeds Fund		1,000	(350)	650
Patient Support Fund – Women's Fund	2,193	3,000	(4,535)	658
Patient Support Fund – Scotland Fund	500	-	(400)	100
Patient Support Fund – Mercers Fund	1,270	-	(1,270)	-
Patient Support Fund – Benenden Fund	-	-	-	-
Patient Support Fund – Maitland Fund	399	2,500	(2,899)	-
TB Action Group	-	-	-	-
International Programmes				
India – APCHIP (DfID CSCF 455)	-	-	-	-
India – TAP (DfID CSCF 550)	-	122,937	(122,937)	-
India – Delhi Divine Project	586	14,000	(7,324)	7,262
India – TB Alert India costs	-	6,762	(6,762)	-
Malawi – JournAIDS	16,550	-	(8,177)	8,373
Zambia – COTHAZ (DfID CSCF 520)	-	112,607	(112,607)	-
Zimbabwe – Murambinda Hospital	-	7,106	(7,106)	-
Advocacy Programmes				
TB Europe Coalition	401	4,806	(5,207)	
Total Restricted Reserves	26,691	587,025	(594,573)	19,143
Unrestricted Funds	259,300	241,564	(274,495)	226,369
Total Funds	<u>285,991</u>	828,589	(869,068)	245,512

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NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2014 - continued

18. DEPARTMENT OF HEALTH GRANT

Project Title: Building Partnership between the Public Sector and Service Users to Increase Awareness of Tuberculosis and Improve TB services. Reference Number: 2011/045

INCOME	
Department of Health grant awarded for current year	<u>189,286</u>
TOTAL FUND	<u>189,286</u>
EXPENDITURES	
CAPITAL EXPENDITURES	
Office Equipment	-
Software/programmes	-
REVENUE EXPENDITURES	
Salary	130,820
On cost on salary (NI and Pension)	18,934
Travel & subsistence (staff)	13,291
Recruitment	795
Volunteers training	-
Staff training	1,107
Volunteers cost (travel & subsistence)	162
Rent	10,291
Finance costs	32
Telephone	2,036
Postage	2,660
Stationery/disks/CDs	53
Events (conferences & seminars)	1,496
Marketing/promotion/publicity	706
Printing	890
Research	-
Consultancy	-
Database cost	-
Website design cost	268
Website maintenance cost	-
Evaluation and dissemination	830
Accountant fees	1,718
Professional fees	-
Steering group (travel & subsistence)	-
Governance costs (Trustees)	3,197
TOTAL EXPENDITURES	<u>189,286</u>
Underspend / (overspend)	
Balance carried forward (undergrand to be carried into following year)	